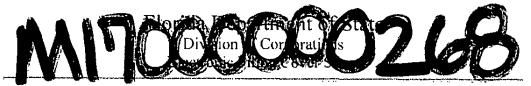
2017-01-10 10:11:57 CST

12122023573 From: Kimberly Laughrey

1/10/2017

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000008595 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (614)280-3338

Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future: annual report mailings. Enter only one email address please.

Email	Address:	

Foreign Limited Liability Company AWRS DADE LLC

Certificate of Status Certified Copy Page Count 04 Estimated Charge \$125.00

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D. SCOTT JAN 1 1 2017

COVER LETTER

TO: Registration Section Division of Corporation	s					
AWRS Dade LLC SUBJECT:						
SUBJEC1:	Name of	Limited Liability Con	прапу			
The enclosed "Application by Fore Existence, and check are submitted	eign Limited Liability Com I to register the above refer	pany for Authorization enced foreign limited	n to Transact Business in F liability company to transa	lorida," Ces act business	rtifica in Flo	te of orida
Please return all correspondence co	oncerning this matter to the	following:				
an at the transportation of public physical production and the	Brian M	eChion .				
	N	aine of Person				
	Alloy Wheel F	epa ()	alints, LLC			
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Peach	ree Corners	GA 3007	<u> </u>	<u> </u>	0	F
	City/S	State and Zip Code		Time Time	霊	-
	E-mail address: (to be use	gun en loyu	beet.com		<u>ب</u> 	
		d for future annual rep	ort notification)	맞는	1 2	
For further information concerning	this matter, please call:					
Crystal F Name of	Whire Son	at (740') Area Code	903-1236 Daytime Telephone Nu	<u>127</u> Imber		
MAILING ADDRESS:		<u>S1</u>	TREET ADDRESS:			
Division of Corporations Registration Section			ivision of Corporations egistration Section			
P.O. Box 6327		Cli	ifton Building			
Tallahassee, FL 32314			661 Executive Center Circlellahassee, FL 32301	e		
Enclosed is a check for the following	ng amount:		-			
□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing F Certified Copy	ee & \$160.00 Filing of Status & Certif	; Fee, Certifi fied Copy	icate	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION (05.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: AWRS Dade LLC (Name of Foreign Limited Linbility Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) ee sections 605,0904 & 605,0905, F.S. to determine penalty liability) ,÷, 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation Florida (City) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. CT Corporation Danny Verdecchia Assistant Secretary (Registered agent's signature) The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 305, Auchtree Cor, GA 50071 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted). ignature of an authorized person This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AWRS DADE LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

6256439 8300

SR# 20170091520 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201829582

Date: 01-06-17